

GENERAL INSTRUCTIONS: Complete Sections I and III through XV of this form as completely as possible. Then use the information on this form to develop a Tentative Disposition (Section II). File this form in its entirety in the regional Hazardous Waste Log File. Be sure to include all appropriate Supplemental Reports in the file. Submit a copy of the forms to: U.S. Environmental Protection Agency; Site Tracking System; Hazardous Waste Enforcement Task Force (EN-335); 401 M St., SW; Washington, DC 20460.

I. SITE IDENTIFICATION

A. SITE NAME Abbott Laboratories		B. STREET (or other Identifier) 6601 South 71st Street	
C. CITY Wichita	D. STATE KS	E. ZIP CODE 67231	F. COUNTY NAME Sedgwick
G. SITE OPERATOR INFORMATION		2. TELEPHONE NUMBER	
1. NAME Abbott Laboratories, Chemical Division		316-522-8181	
3. STREET 6601 South 71st Street	4. CITY Wichita	5. STATE KS	6. ZIP CODE 67231
H. REALTY OWNER INFORMATION (if different from operator of site)		2. TELEPHONE NUMBER	
1. NAME same as operator			
3. CITY		4. STATE	5. ZIP CODE

I. SITE DESCRIPTION There is an abandoned lagoon at the site which was used for disposal of plant wastes till January 1980.

J. TYPE OF OWNERSHIP

☐ 1. FEDERAL ☐ 2. STATE ☐ 3. COUNTY ☐ 4. MUNICIPAL ☒ 5. PRIVATE

II. TENTATIVE DISPOSITION (complete this section last)

A. ESTIMATE DATE OF TENTATIVE DISPOSITION (mo., day, & yr.) 8/25/81	B. APPARENT SERIOUSNESS OF PROBLEM <input type="checkbox"/> 1. HIGH <input type="checkbox"/> 2. MEDIUM <input checked="" type="checkbox"/> 3. LOW <input type="checkbox"/> 4. NONE	
C. PREPARER INFORMATION		
1. NAME V. Kamath	2. TELEPHONE NUMBER 913-862-9360	3. DATE (mo., day, & yr.) 5/26/81

III. INSPECTION INFORMATION

A. PRINCIPAL INSPECTOR INFORMATION	
1. NAME V. Kamath	2. TITLE Environmental Engineer
3. ORGANIZATION KDHE	4. TELEPHONE NO. (area code & no.) 913-862-9360

B. INSPECTION PARTICIPANTS		
1. NAME	2. ORGANIZATION	3. TELEPHONE NO.
V. Kamath	KDHE	913-862-9360
D. Stuckey	KDHE, SCD, Wichita	316-265-3181

C. SITE REPRESENTATIVES INTERVIEWED (corporate officials, workers, residents)		
1. NAME	2. TITLE & TELEPHONE NO.	3. ADDRESS
Kent Houser	Manager, Environmental Control, 316-522-8181	At site address
Bill Fouty	Plant Manager 316-522-8181	At site address



III. INSPECTION INFORMATION (continued)

D. GENERATOR INFORMATION (sources of waste)

1. NAME	2. TELEPHONE NO.	3. ADDRESS	4. WASTE TYPE GENERATED
Abbott Labs	316-522-8181	At site address	Boiler and cooling
			tower blowdown and
			reactor wash down.

E. TRANSPORTER/HAULER INFORMATION

1. NAME	2. TELEPHONE NO.	3. ADDRESS	4. WASTE TYPE TRANSPORTED
KIES	316-744-1286	P.O. Box 745, Wichita, KS 67201	Liquid wastes
			This is not similar to those which were
			disposed of in the old pond.

F. IF WASTE IS PROCESSED ON SITE AND ALSO SHIPPED TO OTHER SITES, IDENTIFY OFF-SITE FACILITIES USED FOR DISPOSAL.

1. NAME	2. TELEPHONE NO.	3. ADDRESS
Waste in the old pond is not processed since January 1980.		

G. DATE OF INSPECTION

(mo., day, & yr.)

5/8/81

H. TIME OF INSPECTION

10 AM to 3:30PM

I. ACCESS GAINED BY: (credentials must be shown in all cases)

☒ 1. PERMISSION☐ 2. WARRANT

J. WEATHER (describe)

Partly cloudy. Heavy rains last night.

IV. SAMPLING INFORMATION

A. Mark 'X' for the types of samples taken and indicate where they have been sent e.g., regional lab, other EPA lab, contractor, etc. and estimate when the results will be available.

1. SAMPLE TYPE	2. SAMPLE TAKEN (mark 'X')	3. SAMPLE SENT TO:	4. DATE RESULTS AVAILABLE
a. GROUNDWATER			
b. SURFACE WATER			
c. WASTE Sludge in pond	x	KDHE Lab.	6/1/81
d. AIR			
e. RUNOFF			
f. SPILL			
g. SOIL			
h. VEGETATION			
i. OTHER (specify)			

B. FIELD MEASUREMENTS TAKEN (e.g., radioactivity, explosivity, PH, etc.)

1. TYPE	2. LOCATION OF MEASUREMENTS	3. RESULTS
none		

IV. SAMPLING INFORMATION (continued)

C. PHOTOS

1. TYPE OF PHOTOS

none

2. PHOTOS IN CUSTODY OF: -----

☐ a. GROUND ☐ b. AERIAL

D. SITE MAPPED?

☒ YES. SPECIFY LOCATION OF MAPS: BES, KDHE Files. Detailed Environmental Control Program developed in April 1980.

E. COORDINATES

1. LATITUDE (deg.-min.-sec.)

37-34-23N

2. LONGITUDE (deg.-min.-sec.)

097-25-54W

V. SITE INFORMATION

A. SITE STATUS

☐ 1. ACTIVE (Those industrial or municipal sites which are being used for waste treatment, storage, or disposal on a continuing basis, even if infrequently.)☒ 2. INACTIVE (Those sites which no longer receive wastes.)

Pond is inactive

☐ 3. OTHER(specify):

(Those sites that include such incidents like "midnight dumping" where no regular or continuing use of the site for waste disposal has occurred.)

But plant is active

B. IS GENERATOR ON SITE?

☐ 1. NO☒ 2. YES(specify generator's four-digit SIC Code): 2869-Industrial organic chemicals.

C. AREA OF SITE (in acres)

Pond area 5 1 acre

D. ARE THERE BUILDINGS ON THE SITE?

☐ 1. NO☒ 2. YES(specify): Plant & office buildings

VI. CHARACTERIZATION OF SITE ACTIVITY

Indicate the major site activity(ies) and details relating to each activity by marking 'X' in the appropriate boxes.

<input checked="" type="checkbox"/> A. TRANSPORTER	<input type="checkbox"/> B. STORER	<input checked="" type="checkbox"/> C. TREATER	<input type="checkbox"/> D. DISPOSER
1. RAIL	1. PILE	1. FILTRATION	1. LANDFILL
2. SHIP	2. SURFACE IMPOUNDMENT	2. INCINERATION	2. LANDFARM
3. BARGE	3. DRUMS	3. VOLUME REDUCTION	3. OPEN DUMP
4. TRUCK	4. TANK, ABOVE GROUND	4. RECYCLING/RECOVERY	4. SURFACE IMPOUNDMENT
5. PIPELINE	5. TANK, BELOW GROUND	5. CHEM./PHYS./TREATMENT	5. MIDNIGHT DUMPING
6. OTHER(specify):	6. OTHER(specify):	6. BIOLOGICAL TREATMENT	6. INCINERATION
	Interim status under RCRA	7. WASTE OIL REPROCESSING	7. UNDERGROUND INJECTION
		8. SOLVENT RECOVERY	8. OTHER(specify):
		9. OTHER(specify):	
		Applied for incineration	Interim status under RCRA

E. SUPPLEMENTAL REPORTS: If the site falls within any of the categories listed below, Supplemental Reports must be completed. Indicate which Supplemental Reports you have filled out and attached to this for..

☐ 1. STORAGE ☐ 2. INCINERATION ☐ 3. LANDFILL ☒ 4. SURFACE IMPOUNDMENT ☐ 5. DEEP WELL

☐ 6. CHEM/BIO/PHYS TREATMENT ☐ 7. LANDFARM ☐ 8. OPEN DUMP ☐ 9. TRANSPORTER ☐ 10. RECYCLOR/RECLAIMER

VII. WASTE RELATED INFORMATION

A. WASTE TYPE

☒ 1. LIQUID ☐ 2. SOLID ☐ 3. SLUDGE ☐ 4. GAS

B. WASTE CHARACTERISTICS

☒ 1. CORROSIVE ☐ 2. IGNITABLE ☐ 3. RADIOACTIVE ☐ 4. HIGHLY VOLATILE

☒ 5. TOXIC ☐ 6. REACTIVE ☐ 7. INERT ☒ 8. FLAMMABLE

☐ 9. OTHER(specify):

C. WASTE CATEGORIES

1. Are records of wastes available? Specify items such as manifests, inventories, etc. below.

NO

VII. WASTE RELATED INFORMATION (continued)

2. Estimate the amount (specify unit of measure) of waste by category; mark 'X' to indicate which wastes are present.

a. SLUDGE	b. OIL	c. SOLVENTS	d. CHEMICALS	e. SOLIDS	f. OTHER
AMOUNT	AMOUNT	AMOUNT	AMOUNT	AMOUNT	AMOUNT
			375 (1980)		
UNIT OF MEASURE	UNIT OF MEASURE	UNIT OF MEASURE	UNIT OF MEASURE	UNIT OF MEASURE	UNIT OF MEASURE
			lbs/year		
<input checked="" type="checkbox"/> (1) PAINT, PIGMENTS	<input checked="" type="checkbox"/> (1) OILY WASTES	<input checked="" type="checkbox"/> (1) HALOGENATED SOLVENTS	<input checked="" type="checkbox"/> (1) ACIDS	<input checked="" type="checkbox"/> (1) FLYASH	<input checked="" type="checkbox"/> (1) LABORATORY, PHARMACEUT.
(2) METALS SLUDGES	(2) OTHER(specify):	(2) NON-HALOGNTD. SOLVENTS	(2) PICKLING LIQUORS	(2) ASBESTOS	(2) HOSPITAL
(3) POTW		(3) OTHER(specify):	<input checked="" type="checkbox"/> (3) CAUSTICS Ammonia	(3) MILLING/MINE TAILINGS	(3) RADIOACTIVE
(4) ALUMINUM SLUDGE			(4) PESTICIDES	(4) FERROUS SMELTING WASTES	(4) MUNICIPAL
(5) OTHER(specify):			(5) DYES/INKS	(5) NON-FERROUS SMLTG. WASTES	(5) OTHER(specify):
			(6) CYANIDE	(6) OTHER(specify):	
			(7) PHENOLS		
			(8) HALOGENS		
			(9) PCB		
			(10) METALS		
			<input checked="" type="checkbox"/> (11) OTHER(specify) Amines		

D. LIST SUBSTANCES OF GREATEST CONCERN WHICH ARE ON THE SITE (place in descending order of hazard)

1. SUBSTANCE	2. FORM (mark 'X')			3. TOXICITY (mark 'X')				4. CAS NUMBER	5. AMOUNT	6. UNIT
	a. SOLID	b. LIQ.	c. VAPOR	a. HIGH	b. MED.	c. LOW	d. NONE			
Amines (mono-, di-ethyl amines)	X					X			not available	
Heavy metals	X					X			not available	

VIII. HAZARD DESCRIPTION

FIELD EVALUATION HAZARD DESCRIPTION: Place an 'X' in the box to indicate that the listed hazard exists. Describe the hazard in the space provided.

☒ A. HUMAN HEALTH HAZARDS

Remedial action initiated in 1980

VIII. HAZARD DESCRIPTION (continued)

☐ B. NON-WORKER INJURY/EXPOSURE

None

☐ C. WORKER INJURY/EXPOSURE

None

☒ D. CONTAMINATION OF WATER SUPPLY

Contamination on-site water wells noticed during the past 2-3 years. Current water supply is bottled water for the plant and office people.

☐ E. CONTAMINATION OF FOOD CHAIN

None

☒ F. CONTAMINATION OF GROUND WATER

Noticed during the past 2-3 years first noted in May 1977. Groundwater also degraded by salt intrusion remedial action was initiated by KDHE in 1980. Only shallow aquifer contamination reported in the past.

☐ G. CONTAMINATION OF SURFACE WATER

None

VIII. HAZARD DESCRIPTION (continued)

☐ H. DAMAGE TO FLORA/FAUNA

None

☐ I. FISH KILL

None

☒ J. CONTAMINATION OF AIR

typical plant odors detected during inspection.

☒ K. NOTICEABLE ODORS

Plant odors

☒ L. CONTAMINATION OF SOIL

none detected

☐ M. PROPERTY DAMAGE

None

VIII. HAZARD DESCRIPTION (continued)

☐ N. FIRE OR EXPLOSION

none

☐ O. SPILLS/LEAKING CONTAINERS/RUNOFF/STANDING LIQUID

none

☐ P. SEWER, STORM DRAIN PROBLEMS

no

☐ Q. EROSION PROBLEMS

no

☐ R. INADEQUATE SECURITY

no

☐ S. INCOMPATIBLE WASTES

no

VIII. HAZARD DESCRIPTION (continued)

☐ T. MIDNIGHT DUMPING

no

☐ U. OTHER (specify):

IX. POPULATION DIRECTLY AFFECTED BY SITE

A. LOCATION OF POPULATION	B. APPROX. NO. OF PEOPLE AFFECTED	C. APPROX. NO. OF PEOPLE AFFECTED WITHIN UNIT AREA	D. APPROX. NO. OF BUILDINGS AFFECTED	E. DISTANCE TO SITE (specify units)
1. IN RESIDENTIAL AREAS	within 1/4 mile only	the plant is affected		
2. IN COMMERCIAL OR INDUSTRIAL AREAS	40	40	plant	
3. IN PUBLICLY TRAVELLED AREAS				
4. PUBLIC USE AREAS (parks, schools, etc.)				

X. WATER AND HYDROLOGICAL DATA

A. DEPTH TO GROUNDWATER (specify unit) 40-50 feet	B. DIRECTION OF FLOW South-Southeast	C. GROUNDWATER USE IN VICINITY Process water
D. POTENTIAL YIELD OF AQUIFER NA	E. DISTANCE TO DRINKING WATER SUPPLY (specify unit of measure) NA	F. DIRECTION TO DRINKING WATER SUPPLY East
G. TYPE OF DRINKING WATER SUPPLY		
<input type="checkbox"/> 1. NON-COMMUNITY < 15 CONNECTIONS <input checked="" type="checkbox"/> 2. COMMUNITY (specify town): <u>Clearwater, Kansas</u>		
<input type="checkbox"/> 3. SURFACE WATER <input type="checkbox"/> 4. WELL <u>Plant uses bottled water</u>		

X. WATER AND HYDROLOGICAL DATA (continued)

H. LIST ALL DRINKING WATER WELLS WITHIN A 1/4 MILE RADIUS OF SITE

1. WELL	2. DEPTH (specify unit)	3. LOCATION (proximity to population/buildings)	4. NON-COM- MUNITY (mark 'X')	5. COMMUN- ITY (mark 'X')
Currently	none.	Bottled water is currently source of drinking water for plant personnel.		

I. RECEIVING WATER

1. NAME

Little Arkansas River and tributaries

☐ 2. SEWERS☒ 3. STREAMS/RIVERS☐ 4. LAKES/RESERVOIRS☐ 5. OTHER (specify):

6. SPECIFY USE AND CLASSIFICATION OF RECEIVING WATERS

NA

XI. SOIL AND VEGETATION DATA

LOCATION OF SITE IS IN:

☐ A. KNOWN FAULT ZONE☐ B. KARST ZONE☒ C. 100 YEAR FLOOD PLAIN☐ D. WETLAND☐ E. A REGULATED FLOODWAY☐ F. CRITICAL HABITAT☐ G. RECHARGE ZONE OR SOLE SOURCE AQUIFER

XII. TYPE OF GEOLOGICAL MATERIAL OBSERVED

Mark 'X' to indicate the type(s) of geological material observed and specify where necessary, the component parts.

A. OVERBURDEN	B. BEDROCK (specify below)	C. OTHER (specify below)
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
1. SAND		
<input checked="" type="checkbox"/> 2. CLAY		
3. GRAVEL		

XIII. SOIL PERMEABILITY

☐ A. UNKNOWN☐ B. VERY HIGH (100,000 to 1000 cm/sec.)☐ C. HIGH (1000 to 10 cm/sec.)☐ D. MODERATE (10 to .1 cm/sec.)☐ E. LOW (.1 to .001 cm/sec.)☒ F. VERY LOW (.001 to .00001 cm/sec.)

G. RECHARGE AREA

☐ 1. YES☒ 2. NO

3. COMMENTS:

H. DISCHARGE AREA

☒ 1. YES☐ 2. NO

3. COMMENTS:

I. SLOPE

1. ESTIMATE % OF SLOPE

0-3%

2. SPECIFY DIRECTION OF SLOPE, CONDITION OF SLOPE, ETC.

East-Southeast

J. OTHER GEOLOGICAL DATA

There is normally 2' thick layer of top soil at the surface underlain by clay from 0-14' thick. Below the clay layer, sand and gravel layers alternate with clay layers until the Wellington Shale is encountered.

XIV. PERMIT INFORMATION

List all applicable permits held by the site and provide the related information.

A. PERMIT TYPE (e.g., RCRA, State, NPDES, etc.)	B. ISSUING AGENCY	C. PERMIT NUMBER	D. DATE ISSUED (mo., day, & yr.)	E. EXPIRATION DATE (mo., day, & yr.)	F. IN COMPLIANCE (mark 'X')		
					1. YES	2. NO	3. UN- KNOWN
RCRA	EPA	KSD00 7237746	Interim status				X
NPDES	KDHE	IAR94P018	01/28/1981	01/27/86		X	

XV. PAST REGULATORY OR ENFORCEMENT ACTIONS

☐ NONE☐ YES (summarize in this space)

1. Noncompliance notice for NPDES permit in February 1981.
2. Remedial action initiated by KDHE after groundwater contamination was reported by the firm in 1980.

Note: The state of Kansas is in the process of approving plans for closing the old evaporation pond. Detailed plans and past environmental control programs (April 1980) are available at Hazardous Waste Management Section, KDHE.

NOTE: Based on the information in Sections III through XV, fill out the Tentative Disposition (Section II) information on the first page of this form.

SURFACE IMPOUNDMENTS SITE INSPECTION REPORT
(Supplemental Report)

INSTRUCTION
Answer and Explain
as Necessary.

1. TYPE OF IMPOUNDMENT

A large pond which has been used in the past for disposal of plant wastes.

2. STABILITY/CONDITION OF EMBANKMENTS

Good

3. EVIDENCE OF SITE INSTABILITY (Erosion, Settling, Sink Holes, etc.)

☐ YES ☒ NO

4. EVIDENCE OF DISPOSAL OF IGNITABLE OR REACTIVE WASTE

☐ YES ☒ NO

5. ONLY COMPATIBLE WASTES ARE STORED OR DISPOSED OF IN THE IMPOUNDMENT

☒ YES ☐ NO

6. RECORDS CHECKED FOR CONTENTS AND LOCATION OF EACH SURFACE IMPOUNDMENT

☒ YES ☐ NO only one impoundment as uncontrolled site.

7. IMPOUNDMENT HAS LINER SYSTEM

☒ YES ☐ NO compacted clay

7a. INTEGRITY OF LINER SYSTEM CHECKED

☐ YES ☒ NO

7b. FINDINGS

The pond has a compacted clay liner

8. SOIL STRUCTURE AND SUBSTRUCTURE

Normally 2' thick layer of top soil at the surface underlain by clay 0-14' thick.

9. MONITORING WELLS

☒ YES ☐ NO A whole set of monitoring wells have been installed at the site in the past
Regular analytical reports are being sent to Bureau of Oil Field & Geology

10. LENGTH, WIDTH, AND DEPTH

LENGTH 300' WIDTH 150' DEPTH approx. 4'

11. CALCULATED VOLUMETRIC CAPACITY

170,000 cu. feet

12. PERCENT OF CAPACITY REMAINING

Almost 100% - pond is empty now except for about 6"-8" of sludge.

13. ESTIMATE FREEBOARD

NA

14. SOLIDS DEPOSITION

☒ YES ☐ NO About 6"-8" of sludge has settled at the bottom

15. DREDGING DISPOSAL METHOD

None

16. OTHER EQUIPMENT